

Discover the benefits of Medicare



Make the right decision
for your lifestyle

Understand the basics

Soon you'll qualify for Medicare. Let us make it easier for you to get the healthcare benefits you need. We'll help you understand your choices, so you can make decisions that work best for you.

6 important things to know about your Medicare coverage choices

1. There are two ways to get Medicare coverage: **Original Medicare** (Part A and Part B) from the federal government, or a **Medicare Advantage Plan** (Part C) from a private insurance company.
2. Original Medicare has two parts: **Part A** covers hospital stays, skilled nursing care, and more. **Part B** covers doctor visits, outpatient care, and more. See page 7 for more details.
3. For most people, enrollment in Original Medicare is not automatic. It's up to you to sign up.
4. You have 3 months before and after the month you turn 65 to enroll in Original Medicare without paying a penalty for late enrollment.
5. Original Medicare doesn't cover the cost of all medical expenses. That's why many people choose to enroll in a Medicare Advantage Plan or get additional coverage.
6. You can choose to get additional coverage by enrolling in a standalone Medicare Prescription Drug Plan (Part D) and/or a Medicare Supplement plan (also known as Medigap) from a private insurance company.

If you have limited income and qualify for both Medicare and Medi-Cal, there are Medicare Advantage Plans designed to fit your needs. In addition, you might be eligible for a **Cal MediConnect Plan**. A Cal MediConnect Plan combines Medicare and Medi-Cal benefits into one health plan. It also includes extra benefits you don't get from separate plans.



Take it step-by-step

Step 1: Decide if you want Original Medicare (Parts A and B) or a Medicare Advantage Plan (Part C).

Step 2: Decide if you need a prescription drug plan (Part D).

Step 3: Decide if you want supplemental coverage.

Get more value with an all-in-one Medicare Advantage Plan (Part C)

- Replaces Original Medicare by including Part A hospital coverage and Part B medical coverage.
- Often includes prescription drug coverage, with no added premium.
- Provides the convenience of dealing with just one insurer for all your claims.
- Often provides valuable extra benefits, like additional days in the hospital as well as dental, vision, and hearing coverage.
- Limits your financial liability by establishing annual and lifetime limits on your out-of-pocket costs.
- Access is restricted to doctors in your area, contracted with your plan.

Get more flexibility with a reliable Medicare Supplement (Medigap) plan

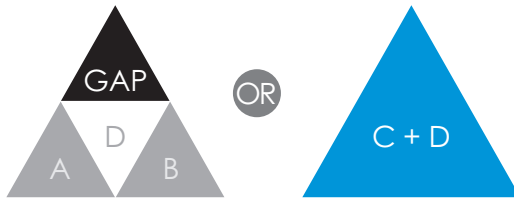
- Covers many of the out-of-pocket expenses that Original Medicare doesn't cover.
- Provides flexibility to choose any Medicare-approved doctor or hospital that accepts Medicare.
- Travels with you nationwide (in some cases, worldwide).
- Provides benefits that are standardized by the government, with plan variations designed to cater to different needs and budgets.

Get more savings and coverage with a Medicare Prescription Drug Plan (Part D)

- Helps pay for prescription medications not covered under Original Medicare.
- Covers generic and brand-name drugs.
- Offered by private insurance companies, with standardized benefits approved by Medicare.
- Available as a standalone plan to complement your existing coverage.
- Included with many Medicare Advantage Plans, often with no additional premium.

If you choose Original Medicare (Part A and Part B) and take any medications, you'll want a standalone prescription drug plan (Part D) too. You may also want a Medicare Supplement plan to cover the cost of benefits not covered by Original Medicare (the GAP).

Alternatively, you can replace Original Medicare altogether with a Medicare Advantage Plan (Part C). Many Medicare Advantage Plans include Part D prescription drug coverage with no additional premium.



These triangles show how a Medicare Supplement plan (also known as Medigap) sits on top of Medicare Parts A, B, and D. You can get complete coverage, but you coordinate the pieces on your own.

Let's compare private insurance options side-by-side

Medicare Supplement (Medigap)	Medicare Advantage
You could have up to three different insurance cards.	You have one insurance card.
You coordinate between Original Medicare, your Medicare Supplement plan, and your Part D prescription drug plan, if you have one.	One company coordinates all your care.
Helps pay for your healthcare costs that are not covered by Original Medicare.	Replaces Original Medicare and can include extra benefits like dental, vision, and prescription coverage.
You can see any doctor nationwide who accepts Medicare.	Restricted to doctors in your area contracted with your plan.

Your Medicare to-do list

6 months before you turn 65

- Research the Medicare plans and options available in your area.
- Decide which coverage options are most important to you based on your needs and budget.

3 months before you turn 65

- Enroll in Original Medicare (Parts A and B).
- Consider which additional plans do the best job of completing your Medicare coverage.

Your 65th birthday month

- Sign up for the additional Medicare coverage you've chosen. You must already be enrolled in Original Medicare (Parts A and B) before you can enroll in additional coverage.

3 months after you turn 65

- Your deadline for enrolling in Original Medicare (Parts A and B) is at the end of this month. If you miss it, you may be charged a late enrollment penalty.
- Enroll in additional Medicare coverage to pay for costs that Original Medicare doesn't cover.

NOTE: If you're already receiving retirement benefits from Social Security or the Railroad Retirement Board, you're automatically enrolled in Original Medicare (Parts A and B). No need to re-enroll.

What Original Medicare covers

Part A covers many services typically provided in a hospital or other facility, including:

- Inpatient care in a hospital
- Skilled nursing facility care
- Inpatient care in a skilled nursing facility (not custodial or long-term care)
- Hospice care
- Home health care

Part B covers many services typically provided at a doctor's office, including:

- Medically necessary services and supplies (needed to diagnose or treat a medical condition)
- Preventive services (needed to prevent or detect illness)
- Additional services such as:
 - Clinical research
 - Ambulance services
 - Durable medical equipment (DME)
 - Mental health
 - Getting a second opinion before surgery
 - Limited outpatient prescription drugs

Note: If you have limited income and resources, your state may help pay for Part A and/or Part B.



Why you might need additional coverage

Original Medicare does NOT pay for:

- ✓ Your Part B monthly premium
- ✓ Parts A and B deductibles
- ✓ Parts A and B coinsurance
- ✓ Most prescription drug costs

Which is right for you?

Take the following steps to help you evaluate your needs and preferences, so you can make an informed choice.

- ① **Complete** the checklist below.
- ② **Review** your results to see which coverage type may be best for you.
- ③ **Call us** to get answers to your questions.
- ④ **Attend** one of our free Medicare information sessions.

A **Medicare Supplement plan** might work better for you if:

- You want the freedom to choose any Medicare-approved doctor.
- You prefer to add to your Original Medicare coverage.
- You want the option of having coverage when you travel.
- You want the option to choose a standalone Medicare Prescription Drug Plan (Part D).

A **Medicare Advantage Plan** might work better for you if:

- You prefer getting care from a defined network of providers.
- You want all-in-one coverage that offers all the benefits of Original Medicare and more.
- You don't mind paying copays or coinsurance when you receive medical care.
- You want coverage for emergencies when you travel.
- You want a plan that already includes prescription drug coverage.

If you have limited income and resources, there are Medicare Advantage Plans designed to fit your needs. In addition, you may also be interested in other types of coverage such as a Cal MediConnect Plan.



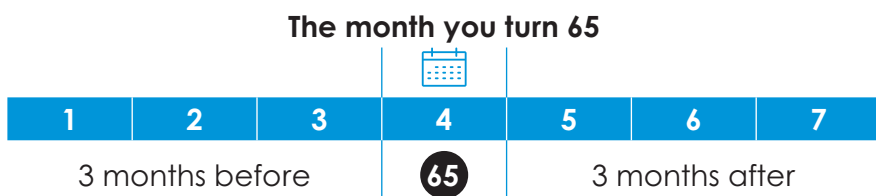


Medicare FAQs

- Q.** Will Original Medicare (Parts A and B) cover all my medical expenses?
- A.** No. Original Medicare doesn't cover the cost of everything. That's why many people get additional coverage by choosing from a range of plans offered by private insurance companies.
- Q.** Does Original Medicare cover prescription drugs?
- A.** No. Although Part A covers the cost of certain medications during hospitalization, routine prescription drugs are not covered. A Medicare Prescription Drug Plan (Part D) can help with coverage for brand-name and generic drugs. Part D is included with many Medicare Advantage Plans (Part C) or as a standalone plan.
- Q.** Can I keep my preferred doctor and hospital after I enroll in Medicare?
- A.** With Original Medicare or a Medicare Supplement plan, you can use any Medicare-approved doctor or hospital. With most Medicare Advantage Plans, you can use any doctor or hospital that participates in the plan's network.

Q. When can I enroll in Original Medicare?

- A.** You can enroll during a 7-month Initial Enrollment Period that starts three months before and after the month you turn 65. If your birthday is June 15, for example, you can enroll as early as March 1.



Q. When will my Medicare coverage become effective?

- A.** If you enroll during your 7-month Initial Enrollment Period, your coverage takes effect as early as the first day of your birthday month.

Q. What if I don't enroll at 65?

- A.** If you're still working and have coverage through your employer or your spouse's employer, you may not have to pay a late-enrollment penalty. Ask your employer or benefits administrator how your current coverage works with Medicare to avoid paying more than you need to, and get the coverage that meets your needs.


Q. What if I enroll in Medicare but still have health insurance through my employer or my spouse's employer?

- A.** Medicare doesn't automatically know if you have additional coverage. To make sure your bills are sent to the correct payer and avoid delays, tell your doctor and other healthcare providers.

Q. Where can I get more information about Medicare?

- A.** To learn more about the topics discussed in this guide, visit [Medicare.gov](https://www.medicare.gov) or call (800) MEDICARE ((800) 633-4227) [TTY: (877) 486-2048], 24 hours a day, seven days a week.

Learn more

 **Call (888) 898-8099 [TTY: 711]**, 8 a.m. to 8 p.m., seven days a week from October 1 through March 31, and 8 a.m. to 8 p.m., weekdays from April 1 through September 30.

 Visit **bsca.com/chooseblue**

 Find a free Medicare information session at **bsca.com/chooseblue**

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